

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MM	7091	GTR
O.I.P.E. CLASSIFIER	PL	FC 530	9/19
FORMALITY REVIEW	C.Y.C.		10-17-00
RESPONSE FORMALITY REVIEW	b6cay	59667	2/22/01

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
10/8/03	
of 150	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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